ROCHESTER

Minnesota

FIRST CLASS CITY • FIRST CLASS SERVICE

ETHICS ORDINANCE
DISCLOSURE FORM

NAME: Barbara Sorensen

ADDRESS: 970 Elton Hills Cf NW

CITY, STATE, ZIP CODE Rochester, MN 55901

1. What is the name of your position, title or job title with the municipality or City?

Member, Civic Music Board

2. Is this an employed, appointed, or elected position?

appointed

3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

Music Dept

4. When were you hired, appointed or elected to this position?

Oct 2013

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

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5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

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6. Please list any interests you have in a business doing business <u>with</u> the City.

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7. Please list any interest you have in any business located <u>within</u>, or doing business <u>in</u>, the City.

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8. List any and all employment.

Mayo Clinic Rochester

9. List any and all community, civic, or nonprofit organization of which you are a member. If you also serve in any such organization in a leadership or decision-making capacity, please note that capacity. (Please attach a sheet if additional space is needed.)

Optimist Club of Rochester - Bd member

I hereby certify that the above information is complete and accurate.

Barb Sorensen

Signature

1-28-2014

Date